## UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 2 Serial/Patent 51045					
3 Please refund the following fee	e(s):	4 PAP NUM	ER BER	5 DATE FILED	6 AMOUNT
Filing					\$
Amendment					\$
Extension of Time					\$
Notice of Appeal/Appeal					\$
Petition					\$
Issue					\$
Cert of Correction/Terminal Disc.					\$
Maintenance					\$
Assignment					\$
Other					\$
		7 TOTAL AMOUNT OF REFUND \$			\$
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
Overpayment			C	redit Depo	osit A/C #:
Duplicate Payment			9		
No Fee Due (Explanation):					
		·			
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME:		TITLE:			
signature:		FC: 9944			
FC: 9284 FC:					
THIS SPACE RESERVED FOR FINANCE USE ONLY:					
APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

PORM PTO 1577 (01/90)